

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	19A	7061	980
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	CM	71632	01/6/00
RESPONSE FORMALITY REVIEW			11-1-00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	3-29-05
2	U	U	0
3	U	U	0
4	✓	✓	✓
5	N	-	-
6	✓	0	0
7	0	0	0
8	✓	✓	✓
9	0	0	0
10	0	0	0
11	N	-	-
12	N	-	-
13	N	-	-
14	N	-	-
15	N	-	-
16	N	-	-
17	N	-	-
18	N	-	-
19	N	-	-
20	N	-	-
21	0	0	0
22	✓	✓	✓
23	N	-	-
24	N	-	-
25	N	-	-
26	✓	✓	✓
27	N	-	-
28	N	-	-
29	✓	✓	✓
30	✓	✓	✓
31	✓	✓	✓
32	✓	✓	✓
33	✓	✓	✓
34	✓	✓	✓
35	✓	✓	✓
36	✓	✓	✓
37	✓	✓	✓
38	✓	✓	✓
39	✓	✓	✓
40	N	-	-
41			
42		/	/
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45		/	/
46		/	/
47		/	/
48		0	
49		✓	
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If more than 150 claims or 10 actions
staple additional sheet here

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Best Available Copy

Claim	Final	Original	Date
51	N	-	-
52	-	-	-
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